Form **8872** (November 2002).

Political Organization Report of Contributions and Expenditures

OMB No 1545-1696

Department of the Treasury Internal Revenue Service

► See Seperate instructions.

Α	For the period beginning	April 1		,20 12	and ending	June 30	, 20 12
В	Check applicable boxes	✓ Intral report		Change of address	Amended	d report	Final report
1	Name of organization		-				identification number
Lea	d lowa			· · · · · · · · · · · · · · · · · · ·		27 27	51523
2	Mailing address (P O Box or	number, street, and roo	om or s	uite number)			
390	6 Monterey Drive						
	City or town, state, and ZIP c	ode					
vvat 3	erloo, IA 50701 E-mail address of organization					4 Date or	ganization was formed
	liowa@gmail.com	1				1	6/1/2010
	Name of custodian of records		5b	Custodian's address			
			1	3906 Monterey Dr	ive		
Rya	n Ball		}				
			Ш	Waterloo, IA 5070	T		
6a	Name of contact person	- -	6b	Contact person's add	ress		
				PO Box 701			
(ell	i Todd			Des Moines, IA 50	303		
7	Business address of organiza	tion (if different from m	olina a			Lroom or suito	number
'	business address of organiza	don (ii dillerent from m	alling a	duress snown above)	Number, Street, and	room or sale	Humber
	City or town, state, and ZIP of	ode					
	,						
8	Type of report (check only on	e box)					
				f Monthly report	t for the month of		
а	First quarterly report (due	by April 15)					wn above, except the
				December re	port, which is due b	y January 31)	
b	Second quarterly report (due by July 15)		g Pre-election re	eport (due by the 12	th or 15th day	before the election)
				(1) Type of el	ection		
С	Third quarterly report (due	e by October 15)		(2) Date of ele	ection'		
	Π., , , , , ,			(3) For the sta	ate of:		
d	Year-end report (due by	January 31)		h [] no-t	alastian ro-set (-tre-	hu tha aath 1-	. often meneral alaah\
	Mid-year report (Non-elec	ction		h Post-general e	. ,	uy trie 30th day	after general election)
е	year only-due by July 31)			(2) For the sta			
	, , , , , ,			(2) 101 the sta	ale 01		
							00.00
9	Total amount of reported con	tributions (total from all	attach	ed Schedules A).		9	00.00
							25.00
0	Total amount of reported exp	enditures (total from all	attach	ed Schedules B)	<u> </u>	10	
	Under penalties of perjury, and belief, it is true, correct	I declare that I have examined and complete	ned this	report, including accompa	inying schedules and s	tatements, and to	the best of my knowledge
Sig	n					71.	1.
Hei	re /////	fall			k	1///2	//2_
	Signature of author	rized official			D a	ate /	
or I	Paperwork Reduction Act No	tice, see separate inst	tructio	ns.	Cat No 30406G		Form 8872 (11-2002)



Schedule A Itemized Contributions Name of organization		Schedule A page 2 of 3 Employer identification number
ead lowa		27 2751523
Contributor's name, mailing address and ZIP code	Name of contributor's employer	Amount of contribution
•		
	Contributor's occupation	
		\$
	Aggregate contributions	Date of contribution
Contributor's name, mailing address and ZIP code	year-to-date . \$ Name of contributor's employer	Amount of contribution
Contributor's flame, maining address and zir code	Name of contributor's employer	Amount of contribution
	Contributor's occupation	
		\$
	Aggregate contributions	Date of contribution
	year-to-date ▶ \$	
Contributor's name, mailing address and ZIP code	Name of contributor's employer	Amount of contribution
	Contributada assunation	
	Contributor's occupation	s
	A	Date of contribution
	Aggregate contributions vear-to-date \$	
Contributor's name, mailing address and ZIP code	Name of contributor's employer	Amount of contribution
	Contributor's occupation	
		\$
	Aggregate contributions	Date of contribution
Contributor's name, mailing address and ZIP code	year-to-date \$ Name of contributor's employer	Amount of contribution
Contributor's name, mailing address and Zir code	Name of contributor 3 cmployer	Amount of Commodicin
	Contributor's occupation	
		\$
	Aggregate contributions	Date of contribution
	year-to-date , . ▶ \$	
Contributor's name, mailing address and ZIP code	Name of contributor's employer	Amount of contribution
	Contributoria accupation	
	Contributor's occupation	\$
	Aggregate contributions	Date of contribution
	Aggregate contributions year-to-date . \$	
Contributor's name, mailing address and ZIP code	Name of contributor's employer	Amount of contribution
	Contributor's occupation	
		\$
	Aggregate contributions	Date of contribution
Contributor's name, mailing address and ZIP code	year-to-date S Name of contributor's employer	Amount of contribution
Contributor 3 Harrie, maining address and 24 Code	Harrie of contributor 3 on proyer	, and are or obtained and re-
	Contributor's occupation	
		\$
	Aggregate contributions	Date of contribution
	year-to-date ► \$	
Contributor's name, mailing address and ZIP code	Name of contributor's employer	Amount of contribution
	Contributor's occupation	
	Contributor's occupation	\$
	Aggregate contributions	Date of contribution
	Aggregate contributions year-to-date > \$	- STO OF CONTRIBUTION
	J. 7	

Form 8872 (11-2002)

Sheakley PaySystems 1501 Ingersoll Ave Ste 101 Des Moines, IA 50309	ame of recipient's employer ecipient's occupation x services ame of recipient's employer	Employer identification number 27:2751523 Amount of expenditure \$ 25.00 Date of expenditure 6/6/2012
Recipient's name, mailing address and ZIP code Sheakley PaySystems 1501 Ingersoll Ave Ste 101 Des Moines, IA 50309 Tai	ecipient's occupation x services	Amount of expenditure \$ 25.00 Date of expenditure
Sheakley PaySystems 1501 Ingersoll Ave Ste 101 Des Moines, IA 50309 Tai	ecipient's occupation x services	\$ 25.00 Date of expenditure
1501 Ingersoll Ave Ste 101 Des Moines, IA 50309 Ta	x services	Date of expenditure
Des Moines, IA 50309 Ta	x services	
		6/6/2012
Purpose of expenditure	ame of recipient's employer	0.012012
1 dipose of experiantie	ame of recipient's employer	
Professional services	ame of recipient's employer	
Recipient's name, mailing address and ZIP code N		Amount of expenditure
	conjunt's conjuntion	\$ Date of expenditure
, and the second	ecipient's occupation	Date of experioliture
Purpose of expenditure		
Recipient's name, mailing address and ZIP code N	ame of recipient's employer	Amount of expenditure
		\$
R	ecipient's occupation	Date of expenditure
Purpose of expenditure		
Recipient's name, mailing address and ZIP code N	ame of recipient's employer	Amount of expenditure
		\$
R	ecipient's occupation	Date of expenditure
Purpose of expenditure		
Recipient's name, mailing address and ZIP code N	ame of recipient's employer	Amount of expenditure
R	ecipient's occupation	\$ Date of expenditure
	обрын о обобраноп	bute of experience
Purpose of expenditure		
Recipient's name, mailing address and ZIP code N.	ame of recipient's employer	Amount of expenditure
		\$
R	eciplent's occupation	Date of expenditure
Purpose of expenditure		
Subtotal of expenditures reported on this page only Enline 10 of Form 8872	nter here and also include this amount in the	total on \$ 25.00